PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999														199
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL	_		- OR	OTHER	R THAN ENTITY
FOR			NUMBER FILED			NUMBER EXTRA			RATE		FEE	7	RATE	FEE
BASIC FEE									3.3	3	45.00	OR		690.00
TOTAL CLAIMS			/% minus 20=			•			X\$ 9=	十		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =			. 2			X39=	+		1	X78=	15%
ML	MULTIPLE DEPENDENT CLAIM PRESENT											OR		(3%)
* If the difference in column 1 is less than zero, enter "0" in column 2								'	+130=	┸		OR	+260=	
$()_{\alpha} \rightarrow X - OU$									TOTAL	L	_	OR	TOTAL	846
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)										. EN	ПТ	OR	OTHER SMALL	
AMENDMENT A		REM	AIMS IAINING FTER YDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT ·EXTRA		RATE	TK	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	- 10	<u> </u>	Minus	••	00	•		X\$ 9=		\	OR	X\$18=	
	Independent		<u> </u>	Minus	•••		3		X39=	T		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=	T	\top	OR	+260=	
											+		TOTAL	
			umn 1)		(0	Column 2)	(Column 3)		ADDIT. FEI	-			ADDIT. FEE	
AMENDMENT B	310-05	REM	AIMS IAINING TER IDMENT	0	PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	IK	DDI- DNAL EE		RATE	ADDI TIONAL FEE
	Total	· 2	<u>0</u>	Minus	••	20	= <u>(</u>)		X\$ 9=	K		OR	X\$18=	NO
	independent	• 6	5	Minus	•••	5	•0		X39=		\rightarrow	OR	X78=	FEE
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR	+260=	DUE
•										<		OR	TOTAL ADDIT, FEE	70.
(Column 1) (Column 2) (Column 3)											_	,		
AMENDMENT C		REM. AF	AIMS AIMING TER OMENT		PR	HIGHEST HUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	ſ	RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	••		=		X\$ 9=			OR	X\$18=	
	Independent	•	Minus		•••		=		X39=	T	\neg	OR	X78=	
لــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the Prigness Number Previously Paid For IN THIS SPACE is less than 20, enter "20." ** ADDIT FEE														
****	The Trighest Nur The Trighest Nur The Trighest Nurri	nber Pre nber Pre	viously Pa viously Pa	id For IN THIS id For IN THIS	S SPA	CE is less than CE is less than	20, enter "20." 3, enter "3."		DOIT. FEE	propri			TOTAL DOIT, FEE IMD 1,	

Application or Docket Number